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APPLICANTS

ROBERT PAASCH, CORVALLIS, OR;

\*\* CONTINUING DATA \*\*\*\*\* LN

\*\* FOREIGN APPLICATIONS \*\*\*\*\* LN

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Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>LN</i> Initials				

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TITLE  
 PRINT HEAD APPARATUS WITH MALFUNCTION DETECTOR

FILING FEE  RECEIVED 2318	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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